facsimile transmittal

To: Maicie Kay
Company: City of Beaufort
Fax Number:

From: Tara
Date: 4/17/13
Pages: 3 Including cover sheet

Re: McCuistion

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Original to Follow
ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

SECTION A - PROPERTY INFORMATION

A1. Building Owner's Name JAMES H. MCCUISTION

A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.
807 NORTH STREET

City BEAUFORT State SC ZIP Code 29902

A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)
LOT C BLK 57 CITY OF BEAUFORT 121 004 0715

A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.) RESIDENTIAL

A5. Latitude/Longitude: Lat 32 43388 Long 80 67140 Horizontal Datum: NAD 1927 NAD 1983

A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.

A7. Building Diagram Number 5

A8. For a building with a crawl space or enclosure(s):
   a. Square footage of crawl space or enclosure(s) 0 sq ft
      For a building with an attached garage:
   a. Square footage of attached garage 0 sq ft
     b. No. of permanent floor openings in the crawl space or enclosure(s) within 10 feet above adjacent grade 0
        b. No. of permanent floor openings in the attached garage within 10 feet above adjacent grade 0
   c. Total net area of floor openings in A6.b 0 sq in
   d. Engineered flood openings? Yes No

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number
CITY OF BEAUFORT 450026

B2. County Name BEAUFORT

B3. State SC

B4. Map/Panel Number 450026 0005
B5. Suffix D
B6. FIRM Index Date 9/29/86
B7. FIRM Panel Effective/Revised Date 9/29/86
B8. Flood Zone(s) A-V
B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 13.00

B10. Indicate the source of the Base Flood Elevation (BFE) date or base flood depth entered in Item B9.
   X FIS Profile X FIRM X Community Determined X Other (Describe) __________

B11. Indicate elevation datum used for BFE in Item B9: X NGVD 1929 X NAVD 1988 X Other (Describe) __________

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?
   X Yes X No Designation Date __________

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on:
   X Construction Drawings* X Building Under Construction* X Finished Construction

   A new Elevation Certificate will be required when construction of the building is complete.


   Benchmark Utilized KEMPER AZIMUTH Vertical Datum 1928
   Conversion/Comments __________
   Check the measurement used.

   a) Top of bottom floor (including basement, crawl space, or enclosure floor) 14.68
   b) Top of the next higher floor 24.68
   c) Bottom of the lowest horizontal structural member (V Zones only) NA
   d) Attached garage (top of slab) NA
   e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) NA
   f) Lowest adjacent (finished) grade next to building (LAG) 9.14
   g) Highest adjacent (finished) grade next to building (HAG) 9.45
   h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support NA

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information. I certify that the information on this Certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 19 U.S. Code, Section 1001. X

Check here if comments are provided on back of form.

Were latitude and longitude in Section A provided by a licensed land surveyor? X Yes X No

Certifier's Name David E. Gasque License Number 10566

Title Professional Land Surveyor Company Name Gasque & Associates, Inc.

Address 29 Professional Village Circle City Beaufort State SC ZIP Code 29907

Signature Date 2/14/13 Telephone 843-522-1790

FEMA Form 81-31, Mar 09 See reverse side for continuation. Replaces all previous editions

SOUTH CAROLINA PROFESSIONAL SURVEYOR SEAL

2-18-13
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

Comments: JOB # 12-001
CERTIFICATIONS ARE NOT TRANSFERABLE TO ADDITIONAL INSTITUTIONS OR SUBSEQUENT OWNERS

Signature Date 2/14/13

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zones AO and A (without BFE), complete Items E1-E5. If the Certificate is intended to support a LOMA or LOMR-F request, complete Sections A, B, and C. For Items E1-E4, use natural grade, if available. Check the measurement used. In Puerto Rico only, enter meters.

E1. Provide elevation information for the following and check the appropriate boxes to show whether the elevation is above or below the highest adjacent grade (HAG) and the lowest adjacent grade (LAG).
   a) Top of bottom floor (including basement, crawlspace, or enclosure) is _______ feet _______ meters _______ above or _______ below the HAG.
   b) Top of bottom floor (including basement, crawlspace, or enclosure) is _______ feet _______ meters _______ above or _______ below the LAG.

E2. For Building Diagrams 6-9 with permanent flood openings provided in Section A Items 8 and/or 9 (see pages 8-9 of Instructions), the next higher floor (elevation 02.b in the diagram) of the building is _______ feet _______ meters _______ above or _______ below the HAG.

E3. Attached garage (top of slab) is _______ feet _______ meters _______ above or _______ below the HAG.

E4. Top of platform of machinery and/or equipment servicing the building is _______ feet _______ meters _______ above or _______ below the HAG.

E5. Zone AO only. If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? □ Yes □ No □ Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, and E are correct to the best of my knowledge.

Property Owner's or Owner's Authorized Representative's Name

Address City State ZIP Code

Signature Date Telephone

Comments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below. Check the measurement used in Items G8 and G9.

G1. □ The information in Section C was taken from other documentation that has been signed and sealed by a licensed surveyor, engineer, or architect who is authorized by law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

G2. □ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3. □ The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. Permit Number G5. Date Permit Issued G6. Date Certificate of Compliance/Occupancy Issued

G7. This permit has been issued for: □ New Construction □ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building: _______ feet _______ meters (PR Datum)

G9. BFE or (in Zone AO) depth of flooding at the building site: _______ feet _______ meters (PR Datum)

G10. Community's design flood elevation: _______ feet _______ meters (PR Datum)

Local Official's Name Title

Community Name Telephone

Signature Date

Comments

□ Check here if attachments
Building Photographs
See Instructions for Item A6.

| Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. |
| 807 NORTH STREET |
| City | BEAUFORT | State | sc | ZIP Code | 29902 |

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least two building photographs below according to the instructions for Item A6. Identify all photographs with: date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." If submitting more photographs than will fit on this page, use the Continuation Page, following.

02/14/2013
40001 FRONT VIEW

02/14/2013
40001 REAR VIEW